

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	10	7/13
Q.I.P.E. CLASSIFIER		65955	7/13
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/13
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9	N	N	7/13
10	N	N	7/13
11	N	N	7/13
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23	✓	✓	7/13
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26	N	N	7/13
27	N	N	7/13
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30	N	N	7/13
31	N	N	7/13
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33	N	N	7/13
34	N	N	7/13
35	N	N	7/13
36	N	N	7/13
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44	✓	✓	7/13
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46	✓	✓	7/13
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Claim	Final	Original	Date
51	✓	✓	7/13
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53	✓	✓	7/13
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84	✓	✓	7/13
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 stapl additional she t h re

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